

PAGE 02
POLITICAL COMPLIANCE
10/30/2004 00:59 4083510169

Late Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

NAME OF FILER
South Bay Labor Council AFL-CIO Labor Council COPE2 sponsored by South Bay AFL-CIO Labor Council

AREA CODE/PHONE NUMBER I.D. NUMBER (if applicable)
744711

STREET ADDRESS

CITY STATE ZIP CODE

Date of This Filing 10/29/2004

Report No. LIE939-41028

☐ Amendment to Report No. LIE939-41028 (explain below)

No. of Pages 1

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LATE INDEPENDENT EXPENDITURE REPORT
CALIFORNIA FORM 496
For Official Use Only

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED		NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED	
Ms. Margaret Abe-Koga			
OFFICE SOUGHT OR HELD/DISTRICT NO.	SUPPORT	BALLOT NO./LETTER	JURISDICTION
Sought: City Council Member	X		
CCM	OPPOSE		

2. Independent Expenditures Made Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/28/2004 1	Mailer Ref: D	1698.00
1		
1		
1		
1		

Reason for Amendment: _____

Late Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE INDEPENDENT EXPENDITURE REPORT

NAME OF FILER South Bay Labor Council AFL-CIO Labor Council COPE2 sponsored by South Bay AFL-CIO Labor Council		Date of This Filing 10/29/2004	RECEIVED CITY OF MOUNTAIN VIEW NOV -1 A8:54 OFFICE OF CITY CLERK	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 744711	Report No. LIE938-41028		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. LIE938-41028 (explain below)		
CITY	STATE	ZIP CODE		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Ms. Stephanie Schaaf OFFICE SOUGHT OR HELD/DISTRICT NO. Sought: City Council Member CCM			NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/28/2004 	Mailer Ref: D	1698.00

Reason for Amendment: _____

Late Independent Expenditure Report

Type or print in ink.
Amounts may be rounded to whole dollars.

NAME OF FILER South Bay Labor Council AFL-CIO Labor Council COPE2 sponsored by South Bay AFL-CIO Labor Council			Date of This Filing 11/01/2004	RECEIVED CITY OF MOUNTAIN VIEW 04 NOV -2 A8:27 OFFICE OF CITY CLERK 1/1	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER		I.D. NUMBER (if applicable) 744711	Report No. LIE939-41031		
STREET ADDRESS			<input type="checkbox"/> Amendment to Report No. LIE939-41031 (explain below)		
CITY San Jose	STATE CA	ZIP CODE 95125	No. of Pages 1		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Ms. Margaret Abe-Koga			NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED		
OFFICE SOUGHT OR HELD/DISTRICT NO. Sought: City Council Member CCM	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT OPPOSE

2. Independent Expenditures Made

Attach additional information on appropriately labeled continuation sheets.

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/31/2004 1	Phonebanks Ref: D	60.00
1		
1		
1		
1		

Reason for Amendment: